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TO

THE URBAN DISTRICT COUNCIL OF WITHEENSEA.

29th. January, 1901.

Gentlemen.

I herewith present my Annual Report for the year ending 31st. December, 1900.

In compiling the tables given in the enclosed returns, it will be seen that I have given the comparative figures for the year 1899 only for the reason that up to the latter part of 1898, this District formed a part of Patrington Rural District.

I have estimated the population of the District at 1500.

There have been 28 births during the year, and of these, none were illegitimate.

The number of deaths is 31 - a number very much larger than usual and which gives a gross rate of 21.66 deaths per 1000. of these 31, there were 7 among persons not belonging to the District and this brings the net rate to 16.0 per 1000.

Consumption and other Tubercular Diseases account for 6 deaths; Diseases of the Heart for 5; Old Age for 4; Cancer for 3; 4 cases of sudden death were enquired into by the Coroner and in the case of 7, the ages were above 65 years - namely, 71, 72, 74, 78, 81, 83 & 94 years.

11 cases of Infectious Diseases were notified - namely, 2 of Scarlet Fever, 2 of Measles and 7 of Enteric Fever.



Both cases of Scarlet Fever occurred in one family and were visitors to the District. The first was isolated and the house thoroughly disinfected after the convalescence of the patient : a portion of the clothes was however kept back from the disinfecting and given to another child and this accounted for the second case, which on the day of its outbreak, was sent to the Hull Sanatorium, and the house was again disinfected.

In the Spring, we had a rather extensive epidemic of Measles in the District, and the Council at my suggestion included in November, Measles with the Diseases to be notified under the Infectious Disease Notification Act. By this, we hope in the future to be in a position to limit to some extent the spread of the Disease should another outbreak occur. My return of cases therefore only includes those occurring since November.

During September and October, we had 7 cases of Enteric Fever and these were the subject of a Special Report I made to the Council. In that Report, I pointed out that the cause had, in 5 of the cases, (the Alma Street cases) been traced to the contamination of a well supplying drinking water to all those affected. The first analysis of the water from this well, which was made immediately on the occurrence of the first case, was misleading in that it gave the water as fit for drinking purposes. A second analysis, however, made when the other houses supplied by it became affected, showed the water to be contaminated with sewage. Investigation showed that

the unweaved yard, in which this well was situated, had been fouled by persons throwing human excrement upon it during the summer, and the construction of the well - (built of loose bricks and filled on top with soft soil and gravel) - admitted of the easy access of surface water. The discrepancy in the analyses may, I think, be explained by the contamination being intermittent. All possible precautions were taken to prevent further spreading - the well was closed; the drains were taken up and sealed under the supervision of your Surveyor and the yard was covered. Abundant Carbolic Acid (1 in 20) and Perchloride (1 in 1000) were supplied for disinfecting; the evacuations were disinfected and kept apart and removed separately by the Night-Soil Collector and were in no case allowed to be put into the closets - this applied to the urine as well as to the bowel evacuations.

The sixth (Arthur Street) case and the seventh (Queen's Hotel case) occurred quite separately from each other and from the Alma Street cases and no connection could be traced between these three separate lots. The Arthur Street case occurred in a semi-detached house, and hence the well was not to blame. The drain leading from the house to the main was however found untrapped and to be made with clay joints. This drain was taken up and put right, and the same precautions as to disinfecting, in every way taken as in the Alma Street cases. The remaining case occurred at the old Queen's Hotel and was soon its recognition at once removed to the Hill General Infirmary. I may say that while I was in doubt as to its removal,



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had every precaution taken with regard to the disposal of the evacuations. I was unable to find a satisfactory explanation of the cause. As I anticipated in my Report, there were no more cases.

Early in September, I made with your Surveyor an inspection of the Cowsheds and Dairies supplying milk to the District, and on the whole, found them cleanly and in good order, the few suggestions made were promptly carried out by the owners.

In addition to the general inspections of the District during the year, I have with your Surveyor begun and completed a considerable portion of a careful house to house inspection - making notes of and close investigation into the sanitary condition of each house. That this must take a considerable time is necessary from the amount of work to be done. We have from time to time reported to you on the portion inspected and the work of remedying has been proceeded with satisfactorily. The drains leading from North Cliff Terrace, from No. 1 Queen Street, from No. 1 to 4 Alma Street, from the houses in Ebor Arcade and from Highfield Cottages have been taken up and relaid entirely throughout. A large number of closets and cesspools have been reported as requiring reconstruction and these have been proceeded with.

The result of these investigations, so far, has been to show that taken generally, the older private drains are very defective. Clay joints are the rule and as found an important connection with the main (at North Cliff Terrace) made by setting the end of one pipe to a hole knocked in the other.

The closets - the majority of them of the earth-closet type are in very many cases very defective and, as I pointed out in my last year's Report, are frequently in most undesirable proximity to the wells upon which Withernsea depends entirely for its drinking water.

The construction of the wells is most unsatisfactory as no thought seems to have been taken of direct surface contamination.

I have come to the conclusion that the sanitary condition of the District can never be put on a satisfactory basis until some proper system of water supply is adopted - that we have escaped fairly well in the past it is true, but the last cholera and the last Street outbreak of Enteric Fever is an example of what we must consider ourselves open to at any time.

A good system of water supply would make our drinking water safe. It would ensure the proper working of such of our drains as are put in good order: it would remove the stagnant sewage from the mains which causes in hot dry weather the often complained of smell and it would admit of proper waterclosets and bathrooms being put into the houses, which are most exceptional and mostly at present entail great expense in running. I also believe that, apart from the quality of the water filtration, the feature most objected to by the summer visitors (who have so much to Withernsea) is the back yard dump but a yard or two from the privy or the ash pit.

I am, Gentlemen,

Yours truly,

A. D. Sproule

Medical Officer of Health.

